

A Study to Evaluate the Efficacy and Safety of Cevostamab in Prior B Cell Maturation Antigen-Exposed Patients with Relapsed/Refractory Multiple Myeloma

Estado Fin Reclutamiento	Tipo de Participantes No aportado	Rangos de Edad Mayores de 64 , Adultos (18-64 años)
Género Ambos	Fases Fase I , Fase II	Participantes esperados 92
Resultados Sin resultados	Bajo nivel intervención No	Enfermedad rara Si
Cobertura geográfica Multicéntrico internacional	Ámbitos del ensayo seguridad, eficacia, farmacocinética	Terapia avanzada NO

Información

Identificador 2023-505865-94-00 (CTIS)	Cod. Protocolo CO43476
--	----------------------------------

Transicionado 2021-006816-10

Área terapéutica
Enfermedades [C] - Cáncer [C04]

Enfermedad investigada
Relapsed/Refractory Multiple Myeloma

Título Científico
A Phase I/II, Open-Label, Multi-Cohort Study to Evaluate the Efficacy and Safety of Cevostamab in Prior B Cell Maturation Antigen-Exposed Patients With Relapsed/Refractory Multiple Myeloma

Justificación

No aportado

Objetivo Principal

To evaluate the efficacy of cevostamab based on investigator assessed Objective response rate (ORR) To evaluate the safety and tolerability of cevostamab

Variables de Evaluación Primaria

1. ORR, defined as the proportion of participants with an objective response [stringent complete response (sCR), complete response (CR), very good partial response (VGPR), or partial response (PR)], based on investigator-assessed response, according to IMWG criteria
2. Incidence and severity of adverse events, with severity determined according to National Cancer Institute Common Terminology Criteria for Adverse Events (NCI CTCAE) v5.0 and American Society for Transplantation and Cellular Therapy (ASTCT) for CRS and of immune effector cell associated neurotoxicity syndrome (ICANS) grading

Momentos temporales de evaluación primaria

No aportado

Objetivo Secundario

To evaluate the efficacy of cevostamab based on IRC assessed ORR, DOR, CR or better, rate of VGPR or better, OS, PFS, time to first response, time to best response, proportion of participants experiencing a clinically meaningful improvement and time to deterioration assessed by EORTC QLQ-C30 and EORTC QLQ-MY20

To characterize the PK of cevostamab in participants with MM

To evaluate the immune response to cevostamab, potential relationships between cevostamab exposure and pharmacodynamic biomarkers

To make a preliminary assessment of the efficacy of tocilizumab in ameliorating the symptoms of CRS following treatment with cevostamab

To identify biomarkers that may be: - Able to provide evidence of cevostamab activity and to increase the knowledge and understanding of disease biology - Predictive of response to cevostamab - Associated with progression to a more severe disease state, acquired resistance to cevostamab and susceptibility to developing adverse events

Variables de Evaluación Secundaria

1. ORR, defined as the proportion of participants with an objective response based on independent review committee (IRC)-assessed response
2. Duration of response (DOR), defined as the time from the first occurrence of an objective response until the date of disease progression or death from any cause (whichever occurs first), as determined separately by the IRC and the investigator
3. Rate of CR or better, defined as the proportion of participants who achieve a response of sCR or CR, as assessed

separately by IRC and the investigator

4. Rate of VGPR or better, defined as the proportion of participants who achieve a response of VGPR or better, as assessed separately by IRC and the investigator
5. Overall survival (OS), defined as the time from initiation of study treatment to death from any cause
6. Progression-free survival (PFS), defined as the time from initiation of study treatment to the first occurrence of disease progression, relapse, or death from any cause (whichever occurs first), as assessed separately by IRC and the investigator
7. Time to first response (for participants who achieve an objective response), defined as time from initiation of study treatment to first achieving an objective response (separate analyses by IRC and investigator)
8. Time to best response (for participants who achieve an objective response), defined as time from initiation of study treatment to achieving the deepest response (separate analyses by IRC and investigator)
9. Proportion of participants experiencing a clinically meaningful improvement in the fatigue domain of the European Organization for Research and Treatment of Cancer (EORTC) Quality of Life Core-30 Questionnaire (QLQC-30) and EORTC QLQ-MY20
10. Time to deterioration in the fatigue domain of the EORTC QLQ-C30 and/or disease symptoms domain of the EORTC QLQ-MY20
11. Serum concentration of cevostamab at specified timepoints
12. Pharmacokinetics (PK) parameters of cevostamab, as data allow
13. Prevalence of anti-drug antibodies (ADAs) against cevostamab at baseline and incidence of ADAs against cevostamab during the study
14. CRS outcome following administration of tocilizumab (e.g., time to CRS resolution, doses of tocilizumab administered, relationship between serum concentration or other PK parameters for tocilizumab and pharmacodynamic biomarkers)
15. Relationship between serum concentration or other PK parameters for cevostamab and pharmacodynamic biomarkers, including, but not limited to, cytokine release, T cell number, and T-cell activation state
16. Relationship between biomarkers in blood, bone marrow biopsies and aspirates, and tumor tissue and efficacy, safety, PK, immunogenicity, or other biomarker endpoints

Momentos temporales de evaluación secundaria

No aportado

Criterios de Inclusión

Documented diagnosis of multiple myeloma (MM) based on standard International Myeloma Working Group (IMWG) criteria

Evidence of progressive disease based on investigators determination of response by IMWG criteria on or after their last dosing regimen

Prior B cell maturation antigen (BCMA) antibody-drug conjugate (ADC) or chimeric antigen receptor T (CAR-T)

Cohort: participants who have received a BCMA-targeted CAR-T or ADC therapy and are triple-class relapsed or refractory

Prior BCMA Bispecific Cohort: participants who have received a BCMA-targeting T-cell-dependent bispecific (TDB) antibody and are triple-class relapsed or refractory

Eastern Cooperative Oncology Group (ECOG) Performance Status of 0 or 1

Life expectancy is at least 12 weeks

Criterios de Exclusión

Inability to comply with protocol-mandated hospitalization

Pregnancy or breastfeeding, or intention of becoming pregnant during the study or within 5 months after the final dose of cevostamab or within 3 months after the last dose of tocilizumab
Prior treatment with cevostamab or another agent with the same target
Prior BCMA ADC or CAR-T Cohort: prior treatment with any T cell dependent bispecific antibody (TDB) antibody including non BCMA targeting TDB
Prior BCMA Bispecific Cohort: treatment with TDB antibody within 12 weeks prior to enrollment in the study
Prior use of any monoclonal antibody (mAb), radioimmunoconjugate, or ADC as anti-cancer therapy within 4 weeks before first study treatment, except for the use of non-myeloma therapy

Calendario

(Última actualización: 25/03/2026)

Autorización 03/08/2022	Inicio de Ensayo 18/11/2022	Inclusión Primer Paciente 01/12/2022	Interrumpido No aportado	Reiniciado No aportado
Fin de reclutamiento 31/10/2024	Fin prematuro (España) No aportado	Fin prematuro (Global) No aportado	Fin del ensayo en España No aportado	Fin del ensayo global No aportado

Promotor

F. Hoffmann-La Roche AG Switzerland
Grenzacherstrasse 124

Contact Person

Trial Information System - TISL
41616881111
global.eudract@roche.com

Monetary support: N/A

Tipo de promotor: Comercial

Ceim

CEIm de la Comunidad Foral de Navarra

C/ Irunlarrea, 3 31008 Pamplona

ceic@cfnavarra.es

Centros

Cerrado (07/03/2025)

CLINICA UNIVERSIDAD DE NAVARRA

Pamplona/Iruña

NAVARRA

Servicio de Hematología

Cerrado (07/03/2025)

CLINICA UNIVERSIDAD DE NAVARRA

Madrid

MADRID

Servicio de Hematología

Activo (18/11/2022)

HOSPITAL CLINIC DE BARCELONA

Barcelona

BARCELONA

Servicio de Hematología

Cerrado (27/02/2025)

HOSPITAL UNIVERSITARIO Y POLITECNICO LA FE

València

VALENCIA

Servicio de Hematología

Activo (01/02/2023)

HOSPITAL UNIVERSITARIO 12 DE OCTUBRE

Madrid

MADRID

Servicio de Hematología

Medicamentos

Cevostamab

SOLUTION FOR INFUSION

IV INFUSION

Principios Activos: N/A

Experimental

RoActemra 20 mg/mL concentrate for solution for infusion

SOLUTION FOR INFUSION

IV INFUSION

Código ATC: L04AC07 - TOCILIZUMAB

Principios Activos: N/A

Experimental

Sin resultados

A Study to Evaluate the Efficacy and Safety of Cevostamab in Prior B Cell Maturation Antigen-Exposed Patients with Relapsed/Refractory Multiple Myeloma

State
End of recruitment

Type of participants
Not provided

Age Ranges
Older than 64 , Adults (18-64 years)

Gender
Both

Phases
Phase I , Phase II

Expected Participants
92

Results
No results

Low level of intervention
No

Rare disease
Yes

Geographic coverage
International multicenter

Areas of the study
safety, effectiveness, pharmacokinetics

Advanced therapy
NO

Information

Identifier
2023-505865-94-00 (CTIS)

Protocol Code
CO43476

Transitioned 2021-006816-10

Therapeutic area
Diseases [C] - Cancer [C04]

Investigated Disease
Relapsed/Refractory Multiple Myeloma

Scientific Title
A Phase I/II, Open-Label, Multi-Cohort Study to Evaluate the Efficacy and Safety of Cevostamab in Prior B Cell Maturation Antigen-Exposed Patients With Relapsed/Refractory Multiple Myeloma

Rationale

Not provided

Main Objective

To evaluate the efficacy of cevostamab based on investigator assessed Objective response rate (ORR) To evaluate the safety and tolerability of cevostamab

Primary Endpoints

1. ORR, defined as the proportion of participants with an objective response [stringent complete response (sCR), complete response (CR), very good partial response (VGPR), or partial response (PR)], based on investigator-assessed response, according to IMWG criteria
2. Incidence and severity of adverse events, with severity determined according to National Cancer Institute Common Terminology Criteria for Adverse Events (NCI CTCAE) v5.0 and American Society for Transplantation and Cellular Therapy (ASTCT) for CRS and of immune effector cell associated neurotoxicity syndrome (ICANS) grading

Temporary moments of secondary assessment

Not provided

Secondary Objective

To evaluate the efficacy of cevostamab based on IRC assessed ORR, DOR, CR or better, rate of VGPR or better, OS, PFS, time to first response, time to best response, proportion of participants experiencing a clinically meaningful improvement and time to deterioration assessed by EORTC QLQ-C30 and EORTC QLQ-MY20

To characterize the PK of cevostamab in participants with MM

To evaluate the immune response to cevostamab, potential relationships between cevostamab exposure and pharmacodynamic biomarkers

To make a preliminary assessment of the efficacy of tocilizumab in ameliorating the symptoms of CRS following treatment with cevostamab

To identify biomarkers that may be: - Able to provide evidence of cevostamab activity and to increase the knowledge and understanding of disease biology - Predictive of response to cevostamab - Associated with progression to a more severe disease state, acquired resistance to cevostamab and susceptibility to developing adverse events

Secondary Endpoints

1. ORR, defined as the proportion of participants with an objective response based on independent review committee (IRC)-assessed response
2. Duration of response (DOR), defined as the time from the first occurrence of an objective response until the date of disease progression or death from any cause (whichever occurs first), as determined separately by the IRC and the investigator
3. Rate of CR or better, defined as the proportion of participants who achieve a response of sCR or CR, as assessed

separately by IRC and the investigator

4. Rate of VGPR or better, defined as the proportion of participants who achieve a response of VGPR or better, as assessed separately by IRC and the investigator
5. Overall survival (OS), defined as the time from initiation of study treatment to death from any cause
6. Progression-free survival (PFS), defined as the time from initiation of study treatment to the first occurrence of disease progression, relapse, or death from any cause (whichever occurs first), as assessed separately by IRC and the investigator
7. Time to first response (for participants who achieve an objective response), defined as time from initiation of study treatment to first achieving an objective response (separate analyses by IRC and investigator)
8. Time to best response (for participants who achieve an objective response), defined as time from initiation of study treatment to achieving the deepest response (separate analyses by IRC and investigator)
9. Proportion of participants experiencing a clinically meaningful improvement in the fatigue domain of the European Organization for Research and Treatment of Cancer (EORTC) Quality of Life Core-30 Questionnaire (QLQC-30) and EORTC QLQ-MY20
10. Time to deterioration in the fatigue domain of the EORTC QLQ-C30 and/or disease symptoms domain of the EORTC QLQ-MY20
11. Serum concentration of cevostamab at specified timepoints
12. Pharmacokinetics (PK) parameters of cevostamab, as data allow
13. Prevalence of anti-drug antibodies (ADAs) against cevostamab at baseline and incidence of ADAs against cevostamab during the study
14. CRS outcome following administration of tocilizumab (e.g., time to CRS resolution, doses of tocilizumab administered, relationship between serum concentration or other PK parameters for tocilizumab and pharmacodynamic biomarkers)
15. Relationship between serum concentration or other PK parameters for cevostamab and pharmacodynamic biomarkers, including, but not limited to, cytokine release, T cell number, and T-cell activation state
16. Relationship between biomarkers in blood, bone marrow biopsies and aspirates, and tumor tissue and efficacy, safety, PK, immunogenicity, or other biomarker endpoints

Temporary moments of secondary assessment

Not provided

Inclusion criteria

Documented diagnosis of multiple myeloma (MM) based on standard International Myeloma Working Group (IMWG) criteria

Evidence of progressive disease based on investigators determination of response by IMWG criteria on or after their last dosing regimen

Prior B cell maturation antigen (BCMA) antibody-drug conjugate (ADC) or chimeric antigen receptor T (CAR-T)

Cohort: participants who have received a BCMA-targeted CAR-T or ADC therapy and are triple-class relapsed or refractory

Prior BCMA Bispecific Cohort: participants who have received a BCMA-targeting T-cell-dependent bispecific (TDB) antibody and are triple-class relapsed or refractory

Eastern Cooperative Oncology Group (ECOG) Performance Status of 0 or 1

Life expectancy is at least 12 weeks

Exclusion criteria

Inability to comply with protocol-mandated hospitalization

Pregnancy or breastfeeding, or intention of becoming pregnant during the study or within 5 months after the final dose of cevostamab or within 3 months after the last dose of tocilizumab
 Prior treatment with cevostamab or another agent with the same target
 Prior BCMA ADC or CAR-T Cohort: prior treatment with any T cell dependent bispecific antibody (TDB) antibody including non BCMA targeting TDB
 Prior BCMA Bispecific Cohort: treatment with TDB antibody within 12 weeks prior to enrollment in the study
 Prior use of any monoclonal antibody (mAb), radioimmunoconjugate, or ADC as anti-cancer therapy within 4 weeks before first study treatment, except for the use of non-myeloma therapy

Calendar

(Last Update: 25/03/2026)

Authorization 03/08/2022	Start of Trial 18/11/2022	First patient inclusion 01/12/2022	Halted Not aported	Restarted Not aported
End of recruitment 31/10/2024	Premature end (Spain) Not aported	Premature End (Global) Not aported	Trial end (Spain) Not aported	Trial end (Global) Not aported

Sponsor

F. Hoffmann-La Roche AG Switzerland
 Grenzacherstrasse 124

Contact Person

Trial Information System - TISL
 41616881111
global.eudract@roche.com

Monetary support: N/A

Sponsor type: Commercial

Ceim

CEIm de la Comunidad Foral de Navarra

C/ Irunlarrea, 3 31008 Pamplona

ceic@cfnavarra.es

Sites

Closed (07/03/2025)

CLINICA UNIVERSIDAD DE NAVARRA

Pamplona/Iruña

NAVARRA

Servicio de Hematología

Closed (07/03/2025)

CLINICA UNIVERSIDAD DE NAVARRA

Madrid

MADRID

Servicio de Hematología

Active (18/11/2022)

HOSPITAL CLINIC DE BARCELONA

Barcelona

BARCELONA

Servicio de Hematología

Closed (27/02/2025)

HOSPITAL UNIVERSITARIO Y POLITECNICO LA FE

València

VALENCIA

Servicio de Hematología

Active (01/02/2023)

HOSPITAL UNIVERSITARIO 12 DE OCTUBRE

Madrid

MADRID

Servicio de Hematología

Medication

Cevostamab

SOLUTION FOR INFUSION

IV INFUSION

Active Principles: N/A

Experimental

RoActemra 20 mg/mL concentrate for solution for infusion

SOLUTION FOR INFUSION

IV INFUSION

ATC code: L04AC07 - TOCILIZUMAB

Active Principles: N/A

Experimental

No results